BY ORDER OF THE COMMANDER AIR FORCE MATERIEL COMMAND

AFMC INSTRUCTION 44-101 4 SEPTEMBER 1996





CONSULTANTS TO THE COMMAND SURGEON

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OPR: HQ AFMC/SGPC

(Col Stephen T. Powell)

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Certified by: HQ AFMC/SGP

(Col Kenneth F. Steel)
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This instruction implements AFD 44-1, *Medical Operations*. It outlines the objectives of the AFMC Medical Consultant Program which is administered by the Command Surgeon. It explains how consultants are selected and describes their contribution to the mission of the medical service. The program also provides a mechanism for recognizing civilian medical specialists for contributions to the AFMC medical community. This instruction does not apply to the Air National Guard or US Air Force Reserve units and members.

SUMMARY OF REVISIONS

This instruction requires the collection and maintenance of information protected by the Privacy Act of 1974. The authority to collect and maintain the data prescribed in this instruction is 10 U.S.C. 8013. Privacy Act statements required by AFI 37-132, *Air Force Privacy Act Program*, are in the body of each form or document or in a separate statement accompanying each document.

- **1. Policy.** AFMC consultants bring additional professional expertise to each medical unit they visit. They should think of themselves as extending the scope of specialty coverage. They should be received and accorded the respect and dignity given consultants everywhere.
- **2. Purpose.** The aim of this program is to select specialists to serve as teachers and consultants. Individuals selected as consultants may, upon request, perform one or more of the following functions:
 - 2.1. Augment the major command (MAJCOM) staff during staff visits.
 - 2.2. Provide technical advice concerning their specialty.
 - 2.3. Perform independent professional consultation.
 - 2.4. Conduct education programs and career counseling for military members of the same specialty.
 - 2.5. Help monitor the standards of health care practiced within AFMC.

- 2.6. Conduct medical incident investigations according to AFI 44-119, *Medical Services Quality Imporvement and Risk Management*.
- 2.7. Promote harmony between the professional staffs of AFMC medical treatment facilities (MTF) and adjacent civilian communities.
- **3. Scope.** Consultants to the AFMC Command Surgeon may be designated from any specialty within the medical service. Identification and selection of consultants are limited only to those necessary to provide the best medical support. Honorary consultant designation of civilian specialties is unlimited. Attachment 1 lists some specialty areas from which consultants can be selected.
- **4. Consultant Selection.** The AFMC Command Surgeon designates qualified individuals as consultants by awarding a certificate to the selectee. The Chief of Clinical Services, HQ AFMC/SGPC, functions as the office of primary responsibility (OPR) for this program. HQ AFMC/SGPC maintains a current roster of selected consultants and publishes a roster listing all consultants before 1 December of each year.
 - 4.1. MTF commanders, senior medical service staff officers, and members of the Command Surgeon's office staff may nominate highly qualified military personnel or civilian specialists for selection as a consultant to the Command Surgeon. Nominations must reach HQ AFMC/SGPC by 1 October of each year for selection. Negative replies are required from each MTF. Submit nominations in writing with a current curriculum vitae typed in the format outlined in attachment 2. Eligible nominees must be highly qualified in their specialty, have demonstrated superior performance, and be actively engaged in their specialty. Military nominees are normally senior career officers who have demonstrated outstanding competence in the professional and administrative requirements of their specialty. Civilians may be nominated based on outstanding competence and exceptional support to local MTFs in health care activities or as honorary recognition for their support of AFMC medical programs.
 - 4.2. A board of senior officers of the medical service assigned to the Command Surgeon's office staff will formally review all nominations before submitting nominees to the Command Surgeon for final selection. Letters of appointment may specify terms of appointment, but in no case will an appointment term exceed 5 years.
 - 4.3. Upon designation by HQ AFMC/SG, certificates will be distributed through the facility commander to the selected individuals.
 - 4.4. Identification as a consultant to the AFMC Command Surgeon does not confer additional obligations on the individual over that implicit in the recognition itself, except as noted elsewhere in this instruction.
- **5.** Consultant Visits. Routine and recurring consultant visits for special programs are determined by the commander of the facility to be visited or at the discretion of HQ AFMC/SG. Requests for consultant visits are made directly to HQ AFMC/SGPC. Normally, funding is provided by the sending facility. These visits are scheduled by the designated consultant in coordination with the MTF visited and HQ AFMC/SG staff. Visits by local civilian consultants at no cost to the Air Force for coordination, familiarization, or recognition do not require formal requests; however, the local commander will report all such visits.

- **5.1.** Other Services . Periodic visits and consultant visits to MTFs of other commands or services may be arranged in a similar fashion as above. Funding is negotiable and may be provided by the receiving facility.
- **5.2.** Consultant Visit Request Procedures. The requesting MTF commander will send the request to HQ AFMC/SGPC. The request should include the specialty required, the reason for the visit, proposed dates, fund cite if applicable, and a point of contact (POC) who will arrange for billeting and local transportation. HQ AFMC/SGPC will coordinate and schedule the visit with a consultant and the consultant's commander.
- **5.3. Coordination Procedures.** The consultant should ensure that telephone communication, in addition to written messages, precede each visit to optimally coordinate all lectures, patient consultations, etc. The host commander or a designated representative should make the consultant's visit personally rewarding. The host's major goal should be to ensure that the consultant will wish to return to visit the facility, staff, and surrounding community.
- **5.4. Consulting Privileges.** Military or civilian consultants may be awarded temporary privileges if their visit is an emergency and time limited to 5 days. The provider would receive a temporary medical staff appointment running concurrently with the privileges. The majority of the providers will be awarded regular privileges based upon full verification, and review of credentials, and approval of the MTF commander. An affiliate medical staff appointment may be granted with regular privileges according to AFI 44-119. Instead of full review of privileges, an interservice/intraservice credentials transfer brief may be used if the provider has privileges at another DoD MTF according to AFI 44-119, paragraph 3.20, and attachment 3.

5.5. Consultant Visit Documentation.

- 5.5.1. Each clinical consultant must submit a formal report of the visit within 10 workdays after returning to his or her home station. Use the letter format shown in attachment 3. Send copies to the following addressees:
 - 5.5.1.1. Commander of the facility visited.
 - 5.5.1.2. Commander of the supporting MTF.
 - 5.5.1.3. MAJCOM surgeon of the facility visited when other than AFMC resource.
 - 5.5.1.4. HQ AFMC/SGPC, 4225 Logistics Ave, Ste 23, Wright-Patterson AFB OH 45433-5762 (original).
- 5.5.2. Civilian consultant should be encouraged by the Chief of Hospital/Clinic Services to send reports to the local commander on their visits. The local commander sends a copy of these reports to HQ AFMC/SGPC.
- **5.6.** Continuing Health Education (CHE). The commander at the sending MTF must ensure that each visiting consultant has a least three Category I CHE lectures preapproved for use throughout the current fiscal year.
 - **5.6.1. Consultants Responsibilities.** Apply for Category I recognition of their programs according to AFI 41-117, *Medical Service Officer Education*.
- **5.7.** Canceled Visits. The sending MTF should notify the receiving MTF and HQ AFMC/SGPC promptly when a scheduled consultant visit must be canceled.

6. Unscheduled Visits. The MTF commanders or HQ AFMC/SG may request additional unscheduled consultation at any time during a particular year. Direct coordination between the local commander and consultant is authorized. HQ AFMC/SGPC must be notified by message when such arrangements are made. Normally, funding of these special visits is provided by the requesting MTF.

LEE P. RODGERS, Colonel, USAF Command Surgeon

Attachment 1

CONSULTANT SPECIALTY AREAS

Example A1.1. Speciality Areas. Medicine All Specialties Surgery All Specialties Dental All Specialties Allied Science All Specialties Nursing

All Specialties

Attachment 2

CURRICULUM VITAE FORMAT

Example A2.1. Format.

AUTHORITY: 10 U.S.C. 8013; F030 AF A.

PURPOSE: To provide information necessary for the selection of consultants to the AFMC Surgeon.

ROUTINE USE: For processing activities and approval authority to determine if nominees meet criteria or recognition as consultants to the AFMC Surgeon.

DISCLOSURE IS VOLUNTARY: However, if personal information is not provided, no further action can be taken on the application and approval cannot be granted.

CURRICULUM VITAE

1. IDENTIFICATION:	
a. Date:	
b. Name:	
(Last)(First)(MI)	
c. Grade:	
d. Birthdate:	
e. Current Assignment and Office Symbol:	
g. Office Phone (DSN):	
2. BACKGROUND:	
a. Undergraduate Education:	
(1) School:	

(2) Major:
(3) Degree:
(4) Date:
b. Professional Education:
(1) School:
(2) Degree:
(3) Date:
c. Post-graduate Education:
(1) Hospital:
(2) Specialty:
(3) Date:
d. Professional Specialty Course:
(1) Course Title:
(2) Location:
(3) Date:
e. Professional Military Education:
(1) Course Title:

(2) Location:
(3) Date:
3. LICENSURE AND CERTIFICATION:
a. Licensure:
(1) State:
(2) License Number:
(3) Date:
b. Specialty Board Certification:
(1) Specialty:
(2) Certificate Number:
(3) Date:
c. ACLS Certification:
(1) Date:
(2) Category:
d. ATLS Certification:
(1) Date:

- (2) Category:
- 4. PROFESSIONAL ORGANIZATION MEMBERSHIP:
- 5. HONORS AND EXECUTIVE POSITIONS HELD:
- 6. PUBLICATIONS:
- 7. HOURS OF CONTINUING EDUCATION IN LAST TWO YEARS (LIST):
- 8. OTHER CONTRIBUTORY INFORMATION:

Attachment 3

FORMAT FOR AFMC SURGEON CONSULTANT VISIT REPORTS

Example A3.1. Letter Format.

(Appropriate Letterhead)

MEMORANDUM FOR HQ AFMC/SGPC
4225 LOGISTICS AVE STE 23
WRIGHT-PATTERSON AFB OH 45433-5762
FROM:
SUBJECT: Report of AFMC Surgeon Consultant Visit
1. Record of visit:
a. Facility visited.
b. Dates of visit.
2. Professional evaluation of the medical specialty as it relates to its mission and capability.
a. Observations on the adequacy of professional staff as related to the scope of health care delivery in consultant's specialty.
b. Observations on the continuing program within the appointed consultant's specialty.
3. Review of Health Services Inspection (HSI) discrepancies.
4. Services rendered as teacher or lecturer.

5. Specific recommendations made to the visited facility's commander for improvement of patient care.

6. C	areer	objective	counseling	rendered.
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7. Recommendations for improving quality assurance and risk management: Each report must include comments on quality assurance or risk management programs relating to the consultant's area of expertise. The report should include which specific areas the consultant examined to provide this judgment, such as inpatient records, outpatient records, committee minutes. Comments should be precise, e.g., specific number of cases or records reviewed, exact period of time reviewed (Jan-Jun 96). Clearly identify cases (register number on the inpatient record) where significant discrepancies are found.

8.	Other	obser	vations.
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(Signature)

Attachment:

CHE Attendance Record

cc: USAF Hospital/SG

MAJCOM/SG (when other than AFMC resource)